revocation of power of

ATTORNEY WITH

∆6

AUG 0 1 2005

#1300 P.004/004 T-882 PUZ/US U-523

09/787,982

03/22/2001

Herbert Ulrich AND CHANGE OF CORRESPONDENCE ADDRESS I hereby revoke all previous powers of afformed given in the above-identified application. A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number: A Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 24131 24131
CHANGE OF CORRESPONDENCE ADDRESS Examiner Name Affidiney Docket Number RL-05-021 I hereby revoke all previous powers of afformed given in the above-identified application. A Power of Afformey is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number: Yelease change the correspondence address for the above-identified application to: The address associated with Customer Number: 24131
Afterney Docket Number RL-05-021 I hereby revoke all previous powers of afterney given in the above-identified application. A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number: 24131 Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 24131
I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number: Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 24131
A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number: 24131 Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 24131
A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number: 24131 Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 24131
I hereby appoint the practitioners associated with the Customer Number: 24131 Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 24131
I hereby appoint the practitioners associated with the Customer Number: 24131 Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 24131
I hereby appoint the practitioners associated with the Customer Number: 24131 X Please change the correspondence address for the above-identified application to: X The address associated with Customer Number: 24131
I hereby appoint the practitioners associated with the Customer Number: 24131 X Please change the correspondence address for the above-identified application to: X The address associated with Customer Number: 24131
Please change the correspondence address for the above-identified application to: X The address associated with Customer Number: 24131
Please change the correspondence address for the above-identified application to: X The address associated with Customer Number: 24131
The address associated with Customer Number: 24131
The address associated with Customer Number: 24131
The address associated with Customer Number: 24131
The address associated with Customer Number: 24131
Customer Number: 24131
OR
Firm or
Address
Audiess '
City State Zip
Country
Telephone
Email
am the:
Applicant/Inventor.
Assignee of record of the entire interest. See 37 CFR 3.71
Statement under 37 CFR 3.73(b) Is anclosed. (Form PTO/SB/96)
SIGNATURE of Applicant or Assignee of Record
Name
Increase Uman
Date 30.06.05 Telephone
IOTE: Signatures of all the inventors or areignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one
X
Torne 3re Enginities.
nia collection of information is required by 37 CEP 1 ap. The
his collection of process is required by 37 CFR 1.38. The information is required to obtain or retain a banefit by the public which is to file (and by the USPTO cluding asthoring, greening, are earlier and as the cluding asthoring, greening, are earlier and as the cluding asthoring, greening, are earlier and as the cluding asthoring, greening, and asthoring asthoring as the cluding as the clud
his collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a banefit by the public which is to file (and by the USPTO process) an application. Confidentially is governed by 33 U.S.C. 122 and 37 CFR 1.31 and 1.14. This collection is estimated to take 3 minutes to complete, or the information of the public of the public of the complete of the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Potent OTRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA. 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS

Application Number

Filing Date

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.